

SECOND SUPPLEMENTAL APPLICATION DATA SHEET

Application Information

Application number::	10/562,383
Filing Date::	<u>June 13, 2007</u>
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	Listing
Number of CD disks::	3
Number of copies of CDs::	2
Sequence submission?::	CD
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title ::	METHODS AND NUCLEIC ACIDS FOR ANALYSES OF COLORECTAL CELL PROLIFERATIVE DISORDERS
Attorney Docket Number::	47675-171
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Petition included?::	
Petition Type::	
Licensed U.S. Gov't Agency::	
Contract or Grant No::	

Secrecy Order in Parent Appl.?: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Catherine
Middle Name::
Family Name:: Lofton-Day
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 4816 Linden Avenue North
City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98103

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Fabian
Middle Name::
Family Name:: Model
Name Suffix::

City of Residence::	<u>Berlin</u>
State or Province of Residence::	
Country of Residence::	<u>DE</u>
Street of mailing address::	<u>Debenzerstrasse 73</u>
City of mailing address::	<u>Berlin</u>
State or Province of mailing address::	
Country of mailing address::	<u>DE</u>
Postal or Zip Code of mailing address::	<u>12683</u>

Third Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Andrew
Middle Name::	<u>Z.</u>
Family Name::	Sledziewski
Name Suffix::	
City of Residence::	Shoreline
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	17736 15 th Avenue NW
City of mailing address::	Shoreline
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98177

Fourth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	<u>DE</u>
Status::	Full Capacity
Given Name::	Tamas
Middle Name::	
Family Name::	Rujan
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	<u>DE</u>
Street of mailing address::	<u>Muehsamstrasse 64</u>
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	<u>DE</u>
Postal or Zip Code of mailing address::	<u>10249</u>

Fifth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	<u>DE</u>
Status::	Full Capacity
Given Name::	<u>Joern</u>
Middle Name::	
Family Name::	Lewin
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	

Country of Residence::	<u>DE</u>
Street of mailing address::	<u>Schwartzkopffstrasse 10</u>
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	<u>DE</u>
Postal or Zip Code of mailing address::	<u>10115</u>

Sixth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	<u>DE</u>
Status::	Full Capacity
Given Name::	<u>Juergen</u>
Middle Name::	
Family Name::	Distler
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	<u>DE</u>
Street of mailing address::	<u>Herderstrasse 24</u>
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	<u>DE</u>
Postal or Zip Code of mailing address::	<u>12163</u>

Correspondence Information

Correspondence Customer Number:: **22504**

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

Fax Number:

E-Mail address::

Representative Information

Representative Customer Number::		22504
----------------------------------	--	--------------

Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/020336	06/23/04
PCT/US2004/020336	Non provisional of	10/603,138	06/23/03
PCT/US2004/020336	Non provisional of	10/602,494	06/23/03
PCT/US2004/020336	Non provisional of	10/679,062	10/03/03

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Europe	04090072.2	02/27/04	Yes
Europe	04090175.3	05/06/04	Yes

Assignee Information

Assignee name::	Epigenomics AG
Street of mailing address::	Kleine Präsidentenstr. 1
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	Germany
Postal or Zip Code of mailing address::	10178